



# VOLUNTEER REGISTRATION FORM

Please Check One:  Register New Volunteer (Complete Sections 1,2,3 and 4)  Add Volunteer to Club (Complete Section 1-2)  Change Volunteer Personal Info (Complete Section 1)  Remove Volunteer from Club (Complete Section 1-2)

If changing Volunteer Info, adding or deleting Volunteer to/from a Club, PLEASE indicate volunteer Registration #: \_\_\_\_\_  
 PLEASE USE CAPITAL LETTERS. THANK YOU.

### 1. PERSONAL INFORMATION

Please print applicable information in the boxes below. Abbreviate if necessary to fit the number of boxes given.

LAST NAME										FIRST NAME										GENDER(✓)		
																				M F		
ADDRESS															APT #							
CITY										PROV			POSTAL			CODE						
										O N												
HOME PHONE					WORK PHONE																	
FAX					BIRTH DATE																	
					month day year																	
EMAIL ADDRESS																						

### 2. ACTIVITY PROFILE

Please indicate the sport specific and/or athletic club, the name of the club/council in which you are involved and your volunteer position code number.

Club #	Sport or Admin#	Club or Community Council Name	Position #	Region

**If you are registering a new volunteer (over 16 years of age), a Consent to Disclose Personal Information (Police Check) waiver must accompany this registration form to the Provincial Office.**

### 3. RELEASE

\* I, the undersigned coach, volunteer, official, parent, or administrator hereby release, discharge and indemnify Special Olympics Canada Inc. from all liability for injury to person or damage to property of myself. \* As a participating Volunteer, I am specifically granting permission to Special Olympics Canada Inc. to use my likeness, voice and words in television, radio, film, newspaper, magazines and other media, and in any form not heretofore described for the purpose of advertising, communicating, and in appealing for funds to support such activities of Special Olympics Canada Inc. and in appealing for funds to support such activities. \* I agree to abide by the Special Olympics Canada Inc. rules, policies and procedures and Code of Conduct. \* The information I have provided may be verified, and I give permission to Special Olympics Ontario Inc. to make inquiries of others which may include a background investigation to determine my suitability to act as an Special Olympics Ontario Inc. volunteer. \* As a participating Volunteer, I may be dealing with confidential information and I agree to keep such information in the strictest confidence. \* The relationship between Special Olympics Ontario Inc. and volunteers is an "at will" arrangement and it may be terminated at any time without cause by either the volunteer or Special Olympics Ontario Inc. \* Any and all references to Special Olympics Canada Inc. include and apply equally to Special Olympics Ontario Inc. \* I affirm that I have read the above and that the information I have given is true and complete.

Date: \_\_\_\_\_ **Signature** \_\_\_\_\_

### 4. REFERENCE CHECKS

1.	Name of Reference	Phone Number of Reference	Date Reference Contacted
2.	Name of Reference	Phone Number of Reference	Date Reference Contacted

This is to verify that I, the undersigned Head Coach or Club Manager, have contacted the above two reference and conducted reference checks as outlined in the Sport Club Manual.

Head Coach or Club Manager Name (Please print) \_\_\_\_\_ Head Coach or Club Manager Signature \_\_\_\_\_

Are you related to an athlete? Please give athlete's name and your relation to the athlete.

Delete Volunteer from Database – please give reason:

\*\*\* Sport Codes and Volunteer Position Codes are listed on the back of this document \*\*\*